RESIDENT RAPTOR CAPTURE LICENSE APPLICATION FOR YEAR 2013

FEE - \$38.00

No person shall receive more than two (2) general raptor capture licenses \mathbf{OR} one (1) general raptor capture license and one (1) limited quota raptor capture license in any calendar year. No person shall receive more than one (1) limited quota raptor capture license in any calendar year.

Applications for general raptor capture licenses for all raptor species will be accepted January 1 through December 31 for all the calendar year in which the license is valid. Separate applications and fees should be submitted for each raptor applied for. Applications for limited quota raptor capture license for peregrine falcons shall be submitted not later than March 1 during the calendar year in which the licensee intends to take a peregrine falcon. All applications must be submitted to the License Sales and Accounting Section as indicated below.

The Department on a drawing basis may issue a maximum of five (5) limited quota raptor capture licenses to capture peregrine falcons annually. In the drawing, four (4) licenses shall be reserved for residents and one (1) license shall be reserved for non-residents.

Applicant apply	ring for:				
	GENERAL RAPTOR CAPTURE LICENSE: Accipitriformes, Falconiformes (except Peregrine falcon), Stringiformes as listed in 50 CFR 10.13. Application period: January 1 – December 31.				
	GENERAL RAPTOR CAPTURE LICENSE: Golden eagles shall only be taken in accordance with Commission Regulation, Chapter 25, Falconry Regulation, Section 8.				
	LIMITED QUOTA CAPTURE FALCON LICENSI Application period: January 1 – March 1.	E: (Peregrine Falcon)			
FALCONRY P	ERMIT NUMBER:				
	USFWS Issued Permit #:				
	State Issued Permit #:	State Issued:			
LAST NAME	FIRST NAME AND INITIAL	WEIGHT	SEX		
LASI NAME	PIRST NAME AND INITIAL				
MAILING ADI	DRESS	EYES	HAIR		
CITY	H. STATE ZIP CODE	EIGHT: FEET	INCHES		

SPORTSPERSON I.D.	PHONE NUMBER	BIRTH DATE	MO / DAY / YR
SOCIAL SECURITY NUMBER	R (Required)		
PROOF OF RESIDENCY:			
YRS WY RES. or Days Active Military in WY	ONE of the following must be provided:		Complete the PROOF OF RESIDENCY form ON REVERSE SIDE
am a Wyoming Resident as defined in W.S. 23	firm that the information given by me on this applications-1-102(a)(ix)(xv) and 23-1-107 and have been domiciled in e one (1) year immediately preceding the date of applications	in Wyoming for not less than one (1) year	ar and have not claimed
correct. I swear, under penalty	swear that the information given by m of prosecution that I am a Wyoming re ed in Wyoming for not less than one (1	esident as defined in W.S.	23-1-102(a)(ix)(xv)
elsewhere for any purpose durin	ng the one year immediately preceding	the purchase of this licens	se.
APPLICANTS SIGNATURE		DATE	<u> </u>
	TO PRACTICE FALCONRY FROM A S <u>MUST</u> ACCOMPANY THIS APPL		DERAL
NOTE: Please mail this comple	eted application, copy of your falconry	permit and proper fee to	the following:

WYOMING GAME AND FISH DEPARTMENT LICENSE SALES AND ACCOUNTING SECTION 5400 BISHOP BOULEVARD CHEYENNE, WY 82006-0001